By gambling. Therefore, I totally oppose it. We may encourage philanthropic people to give out money, but we don't accept this gambling spirit. I am surprised to find that some of my friends are supporting this and I strongly appeal to the House to oppose this resolution.

Mr. K. Ayyappan (*Ezhuvas-Kanayannur*): I move for a closure, Sir.

Mr. M. K. Devassy (*Adur*): I second it.

Mr. K. P. Kannan Nayar (*Secretary to Government*): So far as the Government position is concerned Government have only to accept the very argument advanced by the hon'ble member for Nemmara On principle, Government cannot accept and Government cannot undertake the responsibility also of running a lottery. Under the act itself it is penal to run lotteries. So, for the Government to give sanction to the Government is a thing which I can't understand. So that it is not possible for the Government to do anything. With reference to the amendment tabled, the position will be made clear by the Government later on.

Mr. Shabdai S. Koder (*Jews*): Little did I expect that hon'ble members who always advocate the cause of the poor and the needy will oppose this resolution. The resolution is opposed because lottery will encourage gambling in our State. I concede that the method I suggest to help the poor is not an ideal one but I do maintain that it is an easy method for solving this problem of the poor and the destitute. Reference has been made by some of the hon'ble members that in no civilised countries lotteries are conducted. This is contrary to truth. Only very recently the Burma Government has started a lottery to run their hospitals. Even the Government of India are encouraging most obnoxious form of gambling, I refer to the races which have impoverished many families in British India. My friend Mr. Mathai opposed also, because he does not like the idea of a man suddenly becoming rich. (*Laughter*). But that can be solved by the prize-winner giving back the money to the Government. (*Laughter*). As I find that many of the non-official members of this House are against this idea, I beg leave of the House to withdraw the resolution.

The resolution was, by leave, withdrawn.

3. Appointment of trained Midwives in Rural areas.

Mrs. Thankamma N. Menon (*Ernakulam Women*): "*This Council recommends to the Government to appoint trained mid-wives in rural areas as early as possible.*"

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I am very glad that His Highness the Maharaja has been gracious enough to give His Highness's Royal assent to the Maternity Bill. The object of my resolution is only to request the Government to expedite the matter. The Hon'ble Minister for Rural Development himself being a medical man knows more about the sufferings of the poor ill-fated women in rural parts during the time of confinement and he also knows the number of cases being mishandled by the untrained and ignorant barber women with their proverbial rusty piece of iron. When Miss Katherine Mayo wrote the book (Mother India) all of us were up against her and rightly too. No doubt she has written a most scandalous book about India and her people. But I ask the hon'ble member of this House whether she is not justified in what she has written about the untrained and ignorant barber women. Is it not a fact that year after year many a woman die due to the bad handling of labour cases by these so called barber midwives. So I hope all the members of this House will agree with me that the time has come to take up this matter very seriously. I hope the Hon'ble Minister for Rural Development who took a very active part during the discussion on the Bill introduced by Mrs. Williams will not find it difficult to accept my resolution.

Mr. A. L. Antony (*Irinjalakkuda*): Sir, I second this resolution. This is a very important matter and I request this House to support the resolution.

Mr. A. V. Moothedan (*Chalakkudi*): On a point of information, Sir, may I know whether there are at present trained midwives in all the taluks of the State?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): In all the hospitals, dispensaries and rural dispensaries and in all the Health Centres there are trained qualified midwives and their number will be over 75. Over and above this there are midwives trained by the Public Health Department, half a dozen every year, who go and settle down in their villages.

Mrs. Thankamma N. Menon (*Ernakulam-Women*): Considering the area of the Cochin State the number is not very high.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): It is not possible to train the required number all in a lot. It is with that intention that half a dozen midwives are trained every year and in the course of a few years we will have midwives working throughout the State.

Mrs. Thankamma N. Menon (*Ernakulam-Women*): There must be a trained midwife within a radius of six miles at least.

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Dr. D. Raghavendra Rao (*Chief Medicl Officer*): The difficulty is this. It is not the paucity of the trained midwives that is being felt. The public do not avail of their services. Take the rural dispensaries. There are about 18 rural dispensaries; to each one of which is attached a midwife. The services of these midwives are not availed of by the public in spite of the fact that strict instructions have been given to them as well as the public in the Gazette that their services are available free to the public. But agelong customs and prejudices are working against the public availing themselves of the opportunities before them. That is the position. It is not exactly the want of the midwives, but the position is that in spite of the fact that midwives are available the people, even the educated class, do not take advantage of the existence of the midwives. This has been my experience wherever I have gone out and asked the rural medical men about it.

Mrs. Thankamma N. Menon (*Ernakulam-Women*): Perhaps these midwives might by demanding big fees.

Mr. M. K. Devassy (*Adur*): Sir, I had no idea of speaking on this resolution. Except for the fact that a speech has been practically provoked by the hon'ble member for medicine I would not have risen to speak now. I am surprised to hear him when he says that it is not the want of midwives that causes the trouble but that it is the reluctance on the part of the people to requisition their services. Sir, this statement is little based on facts. When you consider the number of dispensaries and the number of nurses that we have got, I am not stating anything that is against facts, when I say that in Cochin State to-day we have got only one dispensary for 27 square miles and for every 21,000 people. If one nurse and one dispensary and one doctor will suffice for 21,000 people I can very well understand the argument advanced by the hon'ble member. But if you mean that nurses should be really serviceable to the villagers I think it is the solemn duty of the Government to supply every village in the State with at least one nurse. I can well recall to my mind a time when a doctor demanded double fees for taking out a twin. Probably, that time has disappeared. But whatever that be it is more the scarcity of the dispensaries and the midwives that compel the villagers to depend upon untrained midwives who mishandle labour cases and at whom the doctors will be frowning. But frowning will not save the lives of villagers. I therefore think, Sir, it is the solemn duty on the part of the Government without advancing silly arguments against this resolution to accept it and thereby make it possible to save the lives of several lakhs of people who are being mishandled by the untrained midwives.

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Mr. V. J. Mathai (*Planters*): It seems to me, Sir, that it will never be disputed that more trained midwives are required in the villages. We who come from the rural parts feel the great necessity for at least one trained midwife being appointed in every village. As a matter of fact I know that in about eight villages lying to the south of Mulanthuruthi, there is no single trained mid-wife and in Mulanthuruthi there is only one trained midwife. The work of trained midwives is now being taken up by poor servant women, whose only qualification for the job is that they have brought into the world seven or eight children. Trained in child-bearing—that is the only qualification that they possess. Therefore it will certainly be non-controversial that there is a great necessity for midwives and it ought to be supplied. It has been said that the services of midwives are not made use of. The question therefore arise that if there is very great need for food and the food is placed before you, why is it that you do not take that food? Probably the whole fault lies in the food that is supplied. I humbly submit with due respect to the great work done by this Government for which the Government ought to be congratulated—the figures compare very favourably with regard to the expenditure on medical treatment in our State with other States and even British India and we ought to be proud of it—in spite of all that, I submit, Sir, that we cannot be satisfied with the present condition at all. I would submit that the chief reason why the trained mid-wives existing in certain parts of the State are not called by the ryots is because they demand heavy fees for rendering aid to the people. Therefore my humble submission to the Government would be that trained mid-wives may be stationed in every village on a system of aid or a sort of grant given to them just as we have got grant-in-aid dispensaries. There must be a trained mid-wife in every fairly sized village of the State. I submit with due respect to the Government that this may be carefully considered, the question of giving aid to mid-wives to be stationed in each village, the option being left to them.

Mr. C. V. Iyyu (*Kunnamkulam*): Are not these health visitors trained in mid-wifery?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Yes.

Mr. C. V. Iyyu (*Kunnamkulam*): Do not the Public Health Department train the mid-wives?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Half a dozen are trained every year.

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Mr. President: Will you please explain the actual position at present?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Sir, originally, before we had trained mid-wives, it was seen throughout the whole State that mid-wives belonging to a sort of hereditary class had taken to this profession because their mothers were mid-wives. Finding that they were not utilising modern methods and thereby bringing maternal morbidity, women who were accustomed to conduct labours in the orthodox way were allowed to come to the Maternity Hospital at Trichur and the Women's Hospital at Mattancheri and were given an year's training. After training them they went out to their own villages and whenever they conducted labour cases Government used to give them 8 annas for every labour case attended to by them. This system went on for some years. Afterwards, finding that the Government wanted more hands, trained hands were appointed in the Department. First of all they were appointed in the Hospitals, then we extended it to the several dispensaries and again extended to all the rural dispensaries. Then recently the health centres also appointed about 3 or 4 mid-wives in each of their centre. So at present under the employment of Government there are about 75 mid-wives, distributed all over the State. Over and above this the Municipalities of Trichur, Ernakulam and Mattancheri have employed mid-wives under them. Above all these during the last several years after absorbing a certain number of trained hands in this Department several of these mid-wives who have been trained in institutions at Mattancheri and Trichur, where alone there are facilities for training, have gone back to their villages. The idea of the Government is not to stop encouraging these mid-wives but to train as many as possible and to send them out to the different Panchayats. The remarks that I made in my previous speech was that the public do not still resort to these mid-wives because of the inherent prejudice. It has been only due to a life-long habit. It is being broken down but it will take some time more.

Mr. President: Besides these 75 in Government service how many are there trained? Can the Chief Medical Officer say? Do the health visitors also include in this 75?

Dr. D. Raghavendra Rao (*Chief Medical Officer*): Yes.

മിസ്റ്റർ സി. വി. ഇയ്യു: ബഹുമാനപ്പെട്ട വൈദ്യ മെമ്പറുടെ പ്രസംഗത്തിൽനിന്നും ചില സംഗതികൾ മനസ്സിലായിട്ടുണ്ടെങ്കിലും പരിശീലനംസിദ്ധിച്ച പേറിച്ചികളുടെ എണ്ണം പോരാതെയാണിരിക്കുന്നതെന്നും ഗ്രഹിക്കുവാൻ സാധിച്ചു. പരിശീലനം സ്ത്രീകളെ പ്രസവാശുപത്രികളിൽ ഉപയോഗ

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പ്രമോക്കുന്നതിനു് പ്രതിബന്ധമായിരിക്കുന്നതു് യാഥാസ്ഥിതിക മനസ്ഥിതിയാണെന്നും അഭിപ്രായം പറയുകയുണ്ടായി. ഓരോ ദേശങ്ങളിലേയും ക്ഷുരകജാതിയിൽപെട്ട സ്ത്രീകളെ പ്രസവരക്ഷ പഠിപ്പിക്കുവാനുള്ള വിദ്യാഭ്യാസത്തോതു് കുറച്ചു് നാലാംക്ലാസുവരെ പഠിച്ചവരെ ഈ വിഷയത്തിൽ പരിശീലനം നൽകി അവരെ വില്ലേജുകേന്ദ്രങ്ങളിൽ നിയമിക്കുന്നതായാൽ നന്നായിരിക്കുമെന്നാണു് എനിക്കു തോന്നുന്നതു്. ഇങ്ങിനെ കൊല്ലത്തിൽ ഏകദേശം തിരഞ്ഞെടുത്തു് പത്തുകൊല്ലംകൊണ്ടെങ്കിലും മുഴുവൻ വില്ലേജുകേന്ദ്രങ്ങൾക്കു് ഓരോ മിഡ്‌വൈഫ്മാരെ കൊടുക്കുവാനുള്ള ഭയവു് ഗവൺമെൻറിനുണ്ടായാൽ കൊള്ളാം.

Dr. D. Raghavendra Rao (*Chief Medical Officer*): We cannot train more than that; that is the trouble, Sir.

Mr. President: The resolution is rather vague. I am not sure what the hon'ble the Lady member wants the Government to do. Is it that the Government should really give employment to more trained mid-wives or that Government should train more mid-wives? These to my mind are two different propositions. Government is now employing 75 trained mid-wives in the various hospitals and dispensaries of the State. Besides this Government are training 6 mid-wives every year who go and settle down in the villages. I want to know what exactly she means by the resolution.

Mrs. Thankamma N. Menon (*Ernakulam-Woman*): Train more mid-wives and appoint them.

Dr. A. R. Menon (*Minister for Rural Development*): I want to explain my position. This comes under Rural Development. I may at the very outset say that our idea is that as far as possible there shall be one trained mid-wife in each Panchayat. Though the number of mid-wives now employed is 75 it is only fair to say that they are accumulated in certain local areas. I am fully satisfied by local inspection and hearing representations that the people generally would like to have a mid-wife somewhere within a radius of 6 or 7 miles. There are two difficulties in the way. One is to get sufficient number of hands and secondly the paucity of funds. As I said our idea is with the concurrence of the Government as far as possible to appoint one mid-wife under each Panchayat. If you want to appoint a mid-wife there is no use simply in asking trained mid-wives to go there and carry on their business. They must inevitably demand some remuneration from the parties concerned and it is very difficult to accept any such remuneration from the poor people. This burden must be borne by the department in the rural areas and if you want to make it successful it is essential that you should give

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them at least a bare subsistence allowance. There are 84 Panchayats in the State—take it as somewhere about 100—and it will require about 100 mid-wives to supply the need. That will take some time but I am making representations to the Government that this question is one of great importance in our view, and that the Government should render the necessary financial help in order to carry out this much desired reform. I hope this explanation will be sufficient for the House and the House may rely upon me to do the very best I can to introduce this system in accordance with our financial commitments. Nobody is going to question or deny the necessity of having mid-wives. The argument that even with mid-wives their services are not requisitioned is true to some extent. I do not deny that. But the other charge that they always demand money from the people and that therefore the people do not go to them may have some foundation in it. There is a method of putting an end to that by taking stringent action. The moment a case has been proved that they demanded money from the people there is no harm in the instant dismissal and that will be a sufficient deterrant. These are questions which have engaged our attention seriously and I have talked with the Director of Public Health regarding this matter. I am only saying with regard to the rural areas. That responsibility has to be undertaken by me and the House may rest assured that the views expressed by the House will have due weight with us and as soon as the scheme is ready it will be submitted to the House and I hope the House will be satisfied with our recommendation. In the light of these explanations I hope the Lady member will find her way to withdraw her resolution and leave us to try our best in this matter.

Mrs. Thankamma N. Menon (*Ernakulam-Women*): Sir, I am satisfied with the Hon'ble Minister's reply. I beg leave of the House to withdraw the resolution.

The Resolution was, by leave, withdrawn.

4. Tax for Double Crops to be Abandoned.

Mr. Puthur Achyuta Menon (*Kattur*): (*This House recommends to the Government that the policy of collecting tax for double crops must be abandoned in view of the great hardship experienced by the peasants in these days.*)

Sir, no great proposition of law is involved in this simple resolution, nor are so many rules creating complications, appended to it. I can assure this House it is only a principle of finding out ways and means to live, that this resolution has been brought before this House. Sir, it is not the idea of making so

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